



APPLICATION FOR OFFICIAL SAFETY INSPECTION STATION



(PRINT OR TYPE ALL INFORMATION IN FULL)

1. TRADE NAME: _____ STATION # _____ VENDOR # _____

2. ADDRESS: _____ ()
(STREET & NUMBER) (CITY) (COUNTY) (STATE) (ZIP) (PHONE NO.)

3. MAILING ADDRESS (if different from above) _____

4. OWNER'S NAME: _____

5. ADDRESS: _____ ()
(STREET & NUMBER) (CITY) (STATE) (ZIP) (PHONE NO.)

6. THE STATION APPROVAL VISIT WILL STOP IMMEDIATELY UPON ANY REQUIRED EQUIPMENT ITEM NOT BEING PRESENT.

7. HAS THE APPOINTMENT OF ANY OFFICIAL STATION WITH WHICH YOU HAVE BEEN CONNECTED IN ANY WAY, BEEN SUSPENDED OR REVOKED? YES ____ NO ____ IF YES, PLEASE SEND FULL EXPLANATION WITH THIS APPLICATION. EXPLANATION MUST BE INCLUDED BEFORE APPLICATION WILL BE PROCESSED.

8. \$100.00 CERTIFICATION FEE AND \$25.00 LICENSE FEE REQUIRED ON APPROVAL.

9. DO YOU HAVE PROPER TOOLS AND MECHANICS QUALIFIED TO PERFORM ALL PHASES OF THE VEHICLE SAFETY INSPECTION REQUIREMENTS AND TO MAKE PROPER REPAIRS IF NEEDED? _____ Initial

10. YOU AGREE TO NOTIFY THE UTAH HIGHWAY PATROL SAFETY INSPECTION SECTION IF BUSINESS IS MOVED, SOLD OR CLOSED AND TO ACCOUNT FOR ALL UNUSED INSPECTION CERTIFICATES? _____ Initial
FAILURE TO DO SO MAY RESULT IN CRIMINAL CHARGES.

11. TYPE OF LICENSE APPLIED FOR: 1. PASSENGER, LIGHT TRUCK ☐ 4. ATV ☐
2. MOTORCYCLE ☐ 5. FLEET ☐
3. TRACTOR/TRAILER/MOTORCOACH/SCHOOL BUS ☐ Include Vehicle Types

12. **THIS APPLICATION SHALL BE SIGNED BY THE OWNER, OR IN THE CASE OF A CORPORATION, PARTNERS.**

In consideration of appointment as an official inspection station, if granted, I (we) hereby agree to read carefully all rules, regulations and instructions and to carefully inspect every vehicle presented to this station; to make required adjustments or repairs, only when authorized by owner, at regular charges for such service; to use no unfair means in soliciting such work; to conduct the business in accordance with instructions; to issue Certificate of Inspection and Approval for vehicles only after testing them in the manner prescribed in the official instructions and finding them to be in safe operating condition and in compliance with the law. I (We) understand infractions of the rules and regulations or statutes governing safety inspection may lead to suspension or revocation of the inspection license privileges. Further, I (we) agree to a ninety (90) day probation period, knowing within this period any violation of rules and regulations may result in license revocation without recourse.

This application will remain on file with the Utah Highway Patrol, Vehicle Safety Section, 5500 West Amelia Earhart Drive, Ste. #360, Salt Lake City, Utah 84116.

DATE: _____, 20____ SIGNED: _____
TITLE: _____

STATION APPROVAL									
PERSON IN CHARGE OF CERTIFICATES / STICKERS						Document instructions received			
REQUIRED EQUIPMENT: Building			Hand Tools		Hoist		Inspection Manual		
Headlight Aiming	Screen	Optical	Light Meter	Dial Indicator	Tire Pressure Gauge	Tire Tread Depth Gauge			
Brake Lining Gauges:	Bonded	Riveted	Disc	Rotor Gauge	PLT Drum Gauge	Tape Measure	Computer/Internet _____		
TB Drum Gauge	TB Trailer King Pin		TB 5 th Wheel Tester		FMCSR Handbook	School Bus Standard			
Insurance #			Company Name						
Comments or Recommendations:						Inspector Names		Number	
NAME CHANGE ONLY		Yes	No	LOCATION CHANGE ONLY		Yes	No		

Date: _____	Investigator: _____
Date: _____	Program Manager: _____